

Milpitas Preschool Registration Form • Fall 2009-Spring 2010

Participant's Name: Last: _____ First: _____

Address: _____ City: _____ Zip: _____

Home Phone: (_____) _____ Child's Age: _____ Date of Birth: ____ / ____ / ____ Male Female

Mother's Name: _____ Work #: (_____) ext. _____ Cell Ph # (_____)
(mother/guardian)

Father's Name: _____ Work #: (_____) ext. _____ Cell Ph # (_____)
(father/guardian)

Email Address: _____ Does the participant require any special accommodations to participate in these activities? ☐ YES ☐ NO If Yes, a staff member will contact you.

Class Registration Information (Child must be registered in the appropriate class according to his/her birthdate.)

Circle your **first** class choice:

Participant may be enrolled in one class session only.

Animal Crackers

M/W or Tu/Th

Morning Session or Afternoon Session

KinderKids

M/W or Tu/Th

Morning Session or Afternoon Session

Circle your **second** class choice:

(should your first choice be full)

Animal Crackers

M/W or Tu/Th

Morning Session or Afternoon Session

KinderKids

M/W or Tu/Th

Morning Session or Afternoon Session

Registration Fee:	\$ 100.00
Class Fee*	\$
Total Due:	\$

Payment

- ☐ Check
☐ Credit Card

Youth T-Shirt Size (circle size): XS S M
(2-4) (6-8) (10-12)

*25% of class fee and non-refundable Registration Fee is due at time of registration. Balance can be paid through Payment Plan.

Credit Card Information: Type of Card: MasterCard VISA

Name on Card: _____ Card Number: _____

Exp (M/Y): ____ / ____ Signature Authorizing Use: _____

☐ I authorize this card to be charged the balance due in three equal payments on 10/27/09, 1/12/10 and 3/23/10. ____ initial

Waiver of Liability

DO NOT SIGN THIS DOCUMENT BEFORE YOU READ IT AS IT CONTAINS A WAIVER AND RELEASE OF LIABILITY TO WHICH YOU WILL BE BOUND

I, _____ declare that I am the parent/legal guardian of _____.
I, the undersigned, do hereby agree to allow the individual(s) named herein to participate in the aforementioned activity(ies) and I further agree to indemnify and hold the City of Milpitas harmless from and against any and all liability for any injury which may be suffered by the aforementioned individual arising out of or in any way connected with his/her participation in this activity. The undersigned further authorizes the administration of any first aid steps that may be deemed necessary by qualified personnel. I also grant full permission to the City of Milpitas to use the name and any photographs, videographs, motion pictures or recordings of the individuals named herein for any publicity and promotion purposes without obligation or liability to me. I verify that all the above information is true and accurate. I have read, understand and agree to all of the policies of Milpitas Parks and Recreation Services' in regards to Refund/Cancellations, Transfers, Late Pick-Ups, Camp and Workshop Refunds/Transfers, Code of Conduct and Discipline Plan, and Class Cancellations and Wait Lists listed in the current Activity Guide, on the website and/or on the back of this form. **I ACKNOWLEDGE THAT I HAVE CAREFULLY READ THIS WAIVER AND RELEASE AND I FULLY UNDERSTAND THAT, BY SIGNING BELOW, I AM WAIVING ANY RIGHT THAT I MAY HAVE TO BRING A LEGAL ACTION OR TO ASSERT A CLAIM AGAINST THE CITY OF MILPITAS FOR NEGLIGENCE ON BEHALF OF MYSELF AND THE INDIVIDUALS NAMED HEREIN.**

Signature: _____ Parent ☐ Legal Guardian ☐

Print Name: _____ Date: _____